

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NEW YORK

LONG ISLAND OFFICE

Jason Porter

Plaintiff,

[Insert full name of plaintiff/prisoner]

CIVIL RIGHTS COMPLAINT

42 U.S.C. § 1983

CV 21 5832

JURY DEMAND

YES ☒ NO ☐

-against-

Ernest D. Toulon, Jr.

SEYBERT, J.

LINDSAY, M.J.

Defendant(s).

[Insert full name(s) of defendant(s). If you need additional space, please write "see attached" and insert a separate page with the full names of the additional defendants. The names listed above must be identical to those listed in Part I]

- I. **Parties:** (In item A below, place your name in the first blank and provide your present address and telephone number. Do the same for additional plaintiffs, if any.)

A. Name of plaintiff

Jason Porter

If you are incarcerated, provide the name of the facility and address:

Riverhead 110 CENTER DR
Riverhead, NY 11901

Prisoner ID Number:

332580

If you are not incarcerated, provide your current address:

Telephone Number:

B. List all defendants. You must provide the full names of each defendant and the addresses at which each defendant may be served. The defendants listed here must match the defendants named in the caption on page 1.

Defendant No. 1

ERROL D. TORLOX JR

Full Name

Sheriff

Job Title

110 CENTER DR

RIVERHEAD NY 11901

Address

Defendant No. 2

Full Name

Job Title

Address

Defendant No. 3

Full Name

Job Title

Address

Defendant No. 4

Full Name

Job Title

Address

Defendant No. 5

Full Name

Job Title

Address

II. Statement of Claim:

(State briefly and concisely, the facts of your case. Include the date(s) of the event(s) alleged as well as the location where the events occurred. Include the names of each defendant and state how each person named was involved in the event you are claiming violated your rights. You need not give any legal arguments or cite to cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. You may use additional 8 ½ by 11 sheets of paper as necessary.)

Where did the events giving rise to your claim(s) occur?

RIVERHEAD C.F.
110 CENTER DR, RIVERHEAD NY 11901

When did the events happen? (include approximate time and date)

8-21-21

Facts: (what happened?)

SEE ATTACHED CLAIM

II.A. Injuries. If you are claiming injuries as a result of the events you are complaining about, describe your injuries and state what medical treatment you required. Was medical treatment received?

Added Mental Anguish, Stress, and
INCREASE IN PSYCHOTROPIC MEDICINE

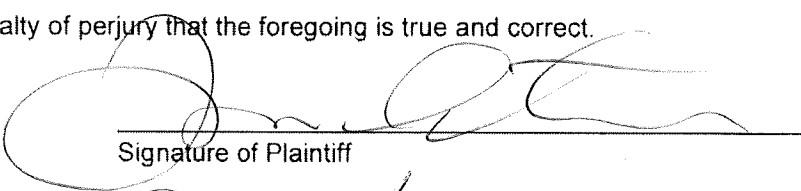
III. **Relief:** State what relief you are seeking if you prevail on your complaint.

2,000,000\$ (Two Million Dollars)

I declare under penalty of perjury that on 10-13-21, I delivered this
(date)
complaint to prison authorities at Riverhead C.F. to be mailed to the United
(name of prison)
States District Court for the Eastern District of New York.

I declare under penalty of perjury that the foregoing is true and correct.

Dated: 10-7-21


Signature of Plaintiff

Riverhead C.F.
Name of Prison Facility or Address if not incarcerated

440 Convent Dr
Riverhead NY 11901

Address

332580
Prisoner ID#

Claim

The Plaintiff herein contends that due to Contributory Negligence of the Defendants ~~THE~~ Plaintiff's 8th Amendment Right to Be Free of Cruel and Unusual Punishment have been violated along with the Plaintiff's 6th and 14th Amendment Right to due process, in such deliberately indifference the Plaintiff, creating Supervisory liability.

For here the Plaintiff was arrested on 6-17-21 and the Mental Health staff here at Riverhead Correctional Facility have failed to conform to the requirements of Mental Hygiene law § 47.01(A) and Mental Hygiene law § 1.03 in their duty to contact Mental Hygiene legal services to ensure that the Plaintiff's rights are protected and not being violated civilly.

However seeing that it is not customary practice for the Mental Health staff to contact Mental Hygiene legal services on behalf of mentally ill prisoners, the Plaintiff is almost certain that the Mental Health staff here at Riverhead C.F.

2.
ARE NOT EVEN AWARE THAT THE
OFFICE OF MENTAL HYGIENE LEGAL
SERVICES EVEN EXISTS, DO IN PART TO
THE DEFENDANTS FAILURE TO TRAIN
AND EXCUSE THAT THE MENTAL HEALTH
STAFF ARE AWARE OF THESE POLICIES
IN SUCH CONTRIBUTING TO THE
NEGLECTANCE OF THE MENTAL HEALTH
STAFF AND DELIBERATELY INDIFFERING
THE PLAINTIFF IN THE PROCESS.

FOR 18-B ATTORNEYS SUCH AS THE ONE
APPOINTED TO THE PLAINTIFF DO NOT
HAVE A VESTED INTEREST IN MENTAL
HYGIENE LAW AND ARE NOT AS SKILLED
IN MENTAL HEALTH CRITERIA AS THE
MENTAL HYGIENE LEGAL SERVICES
ATTORNEYS. HENCE THE REASONING
BEHIND THE MENTAL HYGIENE LAWS
CITED SUPRA.

SUFFOLK COUNTY CORRECTIONAL FACILITY
110 CENTER DRIVE
RIVERHEAD, NY 11901

NAME:

JASON PORTER

332580

United States District Court
Eastern District of New York
100 Federal Plaza
Central Islip, NY 11722
ATT: PRO SE OFFICE



U.S.
FILED
IN CLERK'S OFFICE
U.S. DISTRICT COURT E.D.N.Y.
★ OCT 19 2021 ★

LONG ISLAND OFFICE

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